



Association of California Caregiver Resource Centers

October 19, 2011

Cliff Allenby
California Department of Mental Health
1600 9th Street, Room 100
Sacramento, CA 95814

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DMH DIRECTOR'S OFFICE

Dear Mr. Allenby:

The Association of California Caregiver Resource Centers has prepared a stakeholders statement on behalf of all of the Caregiver Resource Centers. We would appreciate your inclusion of our statement in your stakeholder considerations when DMH prepares its transition plan for the legislature. As stated in our statement we are requesting that Department of Mental Health transition the Caregiver Resource Centers to the Department of Health Care Services Long-Term Care Division. Our complete stakeholder statement is included as an attachment to this letter.

If you have any questions or need further information, do not hesitate to contact me or our President, Susanne Rossi (530) 898-6726. Thank you for including the Caregiver Resource Centers in your transition report to the legislature.

Sincerely,

Vicki Farrell,
Director

California Caregiver Resource Centers

Stakeholder Input to Department of Mental Health

This year marks the 27th year of California's pioneering system of statewide Caregiver Resource Centers (CRCs). For the past two decades, the 11 CRCs have supplied information, education, respite and emotional support to more than a quarter million California families and friends who provide long-term care at home for loved ones suffering from chronic, debilitating health conditions. It is these dedicated families – not institutions – who provide most of the long-term care in the United States, often at great physical, emotional and financial sacrifice.

In 1984 Assemblyman Agnos authored legislation to set up CRCs in 11 regions of the state. Signed by Governor George Deukmejian on September 30, 1984, the Comprehensive Act for Family Caregivers of Brain-Impaired Adults (*Welfare & Institutions Code Section 4362*) established the statewide California Caregiver Resource Center system under the California Department of Mental Health. The CRCs are legislatively mandated to assist families who provide care for loved ones with Alzheimer's disease, stroke, Parkinson's disease, traumatic brain injury, Huntington's disease, multiple sclerosis and other cognitive disorders that occur after the age of 18.

The Role of CRC's in the Long Term Care System

Each of the eleven community based nonprofit CRC's serves as a point of entry to long term care services available to caregiving families in every county of California. While each center tailors its services to its geographic area, all CRCs have a core component of programs that provide information, education & support for caregivers. The CRCs are united by shared values emphasizing choice, collaboration, innovation, quality, participation, respect and diversity. Additionally each CRC:

- Provides a single point of entry for families to access a comprehensive range of services, education and support, tailored to the individual needs and diverse demographics of family caregivers.
- Provides a model of care to help families keep their loved ones at home and out of institutional care as long as possible.
- Collaborates with other community organizations to maximize the support available to family caregivers.
- Educate the public and policy makers about cognitive disorders that occur in adulthood and the subsequent needs of family caregivers.

Core Services include:

- **Specialized Information:** CRCs provide advice and assistance on caregiving issues and stress, diagnoses and community resources.
- **Family Consultation & Care Planning:** Individual sessions and telephone consultations with trained staff to assess needs of individuals who are incapacitated and their families, and to explore courses of action and care options for caregivers.

- **Respite Care:** In-home support to assist families caring at home for an adult with a disabling condition.
- **Short-term Counseling:** family, individual and group sessions with licensed counselors to offer emotional support to caregivers coping with the strain of the caregiving role.
- **Support Groups:** Monthly meetings in a supportive atmosphere to share experiences and ideas to ease the stress of caregiving.
- **Education:** Special workshops on topics such as diagnosis, treatment, long-term care planning and stress management to help caregivers cope with day-to-day concerns.
- **Legal & Financial Consultation:** Personal consultations with experienced attorneys regarding powers of attorney, estate and financial planning, conservatorships, and other matters.

Caregiver Resource Centers & the Regions they serve:

- **Bay Area Caregiver Resource Center** - *Alameda, Contra Costa, Marin, San Francisco, San Mateo & Santa Clara Counties*
- **Coast Caregiver Resource Center** - *San Luis Obispo, Santa Barbara & Ventura Counties*
- **Del Mar Caregiver Resource Center** - *Monterey, San Benito & Santa Cruz Counties*
- **Del Oro Caregiver Resource Center** - *Alpine, Amador, Calaveras, Colusa, El Dorado, Nevada, Placer, Sacramento, San Joaquin, Sierra, Sutter, Yolo & Yuba Counties*
- **Inland Caregiver Resource Center** - *Inyo, Mono, Riverside & San Bernardino Counties*
- **Los Angeles Caregiver Resource Center** - *Los Angeles County*
- **Mountain Caregiver Resource Center** - *Butte, Glenn, Lassen, Modoc, Plumas, Shasta, Siskiyou, Tehama & Trinity Counties*
- **Caregiver Resource Center of Orange County** - *Orange County*
- **Redwood Caregiver Resource Center** - *Del Norte, Humboldt, Lake, Mendocino, Napa, Solano & Sonoma Counties*
- **Southern Caregiver Resource Center** - *Imperial & San Diego Counties*
- **Valley Caregiver Resource Center** - *Fresno, Kern, Kings, Madera, Mariposa, Merced, Stanislaus, Tulare & Trihonne Counties*

Relocation of CRC System

As a stakeholder the CRC system is requesting that the Department of Mental Health transfer the CRC system to the Department of Health Care Services Long-Term Care Division.

CRC's fit within Department of Health Care Services Long-Term Care Division

- Department of Health Care Services (DHCS) mission is to preserve and improve the health status of all Californians. CRC mission includes preserving and improving the health status of California's unpaid family caregivers.

- CRC core services focus on providing family caregivers with community options and choices in the care of their loved one rather than institutionalization.
- CRC's provide cost effective community based services. The eleven community-based nonprofit Caregiver Resource Centers annually serve more than 15,000 families caring for adults age 18 and over affected by brain impairments. The range of disabling conditions our family caregivers cope with include not only age-related cognitive impairments such as Alzheimer's disease and related disorders, but also traumatic brain injury, Huntington's disease, ALS, and Multiple Sclerosis which affect younger adults.
- CRC's are uniquely positioned to help local hospitals and community-based organizations implement the new CMS initiative to reduce unnecessary hospital readmissions. The family caregiver is pivotal to discharge success; however, he or she has never been defined as a key team member for assessment and input into the discharge plan for successful community integration. CRC's in California have the deepest and broadest experience in improving outcomes for caregivers, meaning improved outcomes for high risk patients and should be included as key professionals in assessing and care planning for high risk hospital discharges. (1.) (2.)
- CRC's clients are the adult family member caring for a loved one over the age of 18 with a diagnosis that may have occurred at any point from young adulthood to late adulthood. For example, it is the 38 year-old husband caring for his wife, diagnosed with MS at 36; it could be the 28 year-old man with traumatic brain injury being cared for by his 52 year-old mother who is working full-time and caring for her other children still at home; perhaps it is the 54 year-old wife caring for her husband diagnosed with Early-Onset Alzheimer's at age 56 – the couple have two children in college and their youngest still in high school. There is a common misconception that we only serve seniors, when in fact we serve caregivers of a variety of ages who are caring for a loved one from age 18 to 100+.
- CRC support services help families avoid or delay nursing home placement. Studies show that programs like the CRC delay institutionalization of care recipients by 1.5 years by providing caregivers with appropriate assistance and support (Mittleman, et al, 2006). In California, Medi-Cal pays 63% of all resident days of care at an average cost of \$55,000 per year per resident (Harrington C, et al, UCSF, 2008). The additional 18 months of care at home provided by family caregivers saves the Medi-Cal system approximately \$82,500 per care recipient.

It would be advantageous for our client population if the CRC's were housed within the Department of Health Care Services Long-Term Care Division rather than the Department of Aging, where home and community-based services programs cover both a broad age range and continuum of care. This move will allow family caregivers access to services that will assist them in their goal of providing care in the home for as long as possible and ultimately delaying or preventing institutionalization. It is our belief that that the mission and goals of the Department of Health Care Services Long-Term Care Division is most closely aligned with the mission and goals of the Caregiver Resource Centers; both seek the highest level of health and well-being of the client served.

- (1.) Bridging Troubled Waters: Family Caregivers, Transitions and Long-Term Care. Carol Levine, Deborah Halper, Ariella Peist and David A. Gould HEALTH AFFAIRS 29, No. 1 (2010): 116-124.
- (2.) Sharing the Care: The Role of Family in Chronic Illness. Ann-Marie Roland, M.D., M.S. Prepared for California Health Care Foundation (2009)